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(Depositor's name)
(Signature)

APPLICATION NO.	FILING DATE	1	FIRST NAME	D INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.				
10/568,354	01/12/2007	Udo Heselhaus			07130.0006.PCUS00	2703				
TITLE OF INVENTION:	CONVERTIBLE									
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APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE				
nonprovisional	NO	\$1440		\$300	\$1740	11/10/2008				
EXAMINER		ART UNIT		CLASS-SUBCLASS	TEGA HODDELDS GODGES					
LYJAK, LORI LYNN		3612		296-107010 ñ1 sc.	1008 WABDELR3 00000028 083038 10568354					
1. Change of correspondence CFR 1.363).	e address or indication of "F	ec Address" (37	2. For prir	iting on the patent front page; li	\$64 366 06 DA					
	dence address (or Change of	Correspondence	(1) the names of up to 3 registered patential torneys or agents OR, alternatively,							
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			(2) the name of a single firm (having as a member a 2							
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Cust Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							
•	DECIDENCE DATA TO D	E BRINTED ON T								
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for										
PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.										
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
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		•	•	eatent): Individual Co	orporation or other private gr	oup entity Government				
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Publication Fee (No small entity discount permitted)			Payment by credit card. Form PTO-2038 is attached.							
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	(from status indicated above	•								
	MALL ENTITY status. See			ant is no longer claiming SMA						
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Authorized Signature	111111111111111111111111111111111111111			Date Septe	ember 15, 2008					
Typed or printed name Michael J/Bell			Registration No. 39,604							
This collection of information	on is required by 37 CFR 1.3	11. The informatio	n is required	to obtain or retain a benefit by t	the public which is to file (an	d by the USPTO to process)				
an application. Confidential submitting the completed a this form and/or suggestion. Box 1450, Alexandria. Virg	ity is governed by 35 U.S.C. oplication form to the USPT of reducing this burden, slinia 22313-1450. DO NOT	. 122 and 37 CFR O. Time will vary hould be sent to the SEND FEES OR C	depending up the Chief Information Chief Information Completed	to obtain or retain a benefit by telection is estimated to take 12 point the individual case. Any contion Officer, U.S. Patent and FORMS TO THIS ADDRESS	minutes to complete, including omments on the amount of the Trademark Office, U.S. Dep S. SEND TO: Commissioner	ng gathering, preparing, and me you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,				
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appropriate. All further comindicated unless corrected be maintenance fee notifications	espondence including the lelow or directed otherwises.	ratent, advance order in Block 1, by (a)	FEE and PUBLIC ers and notification specifying a new o	orrespondence address	will be mailed to the current s; and/or (b) indicating a sepa	arate "FEE ADDRESS" for		
CURRENT CORRESPONDENCE HOWREY LLP C/O IP DOCKETING DEP	E ADDRESS (Note: Use Block 1 for ARTMENT	any change of address)		Fee(s) Transmittal. Tr papers. Each addition have its own certificat	mailing can only be used for his certificate cannot be used for al paper, such as an assignme te of mailing or transmission.	or any other accompanying int or formal drawing, must		
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	1 .	CD 15 2008 W	.]			(Depositor's name)		
	\	DEI 1	7			(Signature)		
	\		,			(Date)		
APPLICATION NO.	FILING DATE	Te TRADEUS FI	IRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.		
			Udo Heselhau		07130.0006.PCUS00	2703		
10/568,354 TITLE OF INVENTION:	01/12/2007 CONVERTIBLE		Ogo Flescinau	•	•			
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nonprovisional	NO	\$1440		\$300	\$1740	11/10/2008		
EXAM	INER	ART UNI	т с	LASS-SUBCLASS	1			
LYJAK, LORI LYNN		3612	<u> </u>	296-107010	_			
Address form PTO/SB/12 "Fee Address" indicat PTO/SB/47; Rev 03-02 o Number is required.	lence address (or Change of 22) attached. ion (or "Fee Address" Indica r more recent) attached. Use	Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN	an assignee is identified b 37 CFR 3.11. Completion	elow, no assignee d of this form is NOT	ata will appear on a substitute for filing	the patent. If an assig	nce is identified below, the country)	document has been filed for		
Please check the appropriate	assignee category or category	ories (will not be pri	nted on the patent):	☐ Individual ☐ (Corporation or other private gr	oup entity Government		
4a. The following fee(s) are		4b.	b. Payment of Fee(s):					
☑ Issue Fee			A check in the amount of the fee(s) is enclosed.					
	mall entity discount permitt	,	Payment by credit card. Form PTO-2038 is attached.					
Advance Order - # of	Copies 10		The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number					
5. Change in Entity Status a. Applicant claims S.	(from status indicated abov MALL ENTITY status. See		☐ b. Applicant is r	no longer claiming SM	ALL ENTITY status. See 37 C	CFR 1.27(g)(2).		
		Frank Dublicati	ion Fee (if any) or to from anyone other Office.	o re-apply any previous than the applicant; a re	ly paid issue fee to the applica gistered attorney or agent; or t	ation identified above. the assignee or other party in		
Authorized Signature			Date September 15, 2008					
Typed or printed name N	Aichael J/Bell		Registration No. 39,604					
an application. Confidential submitting the completed a this form and/or suggestion. Box 1450, Alexandria, Virginia 22313.	ity is governed by 35 U.S.C pplication form to the USP s for reducing this burden, s tinia 22313-1450. DO NOT 1450	TO. Time will vary should be sent to the SEND FEES OR C	depending upon the Chief Information OMPLETED FORM	officer, U.S. Patent an MS TO THIS ADDRES	with the public which is to file (ar 2 minutes to complete, includi comments on the amount of to d Trademark Office, U.S. De SS. SEND TO: Commissioner it displays a valid OMB contro	ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450		

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